## 205

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

**Application or Docket Number** 

10035607

									100000					
		CLAIMS AS	S FILED - PART I (Column 1) (Column			mn 2)	_	MALL EN		OR	OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			41				ſ	RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		8	BASIC FEE	370.00	OR	BASIC FEE	740.00		
το	TAL CHARGEA	BLE CLAIMS	4/_ minus 20=		. 21			X\$ 9=		OR	X\$18=	378		
IND	EPENDENT CL	AIMS	7- mi	nus 3 =	* 4		ļΓ	X42=		OR	X84=	336		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=			
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	1454		
CLAIMS AS AMENDED - PART II								SMALL E	ENTITY	OR	OTHER SMALL	THAN		
(Column 1) (Column 2) (Column 3)										•				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIA PAID	BER OUSLY	PRESENT EXTRA	ŀL	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	• 87	Minus	** . 6	41	-46		X\$ 9=		OR	X\$18=	8 28.		
	Independent	* [	Minus	###	7	= 4		X42=		OR	X84=	352.		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							' [	+140=.		OR	+280=			
7414								TOTAL		\'	TOTAL			
								DDIT. FEE		OR	ADDIT. FEE			
(Column 1) (Column 2) (Column 3)														
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NON	Total	•	Minus	**	-	=	11	X\$ 9=		OR	X\$18=			
AME	Independent * FIRST PRESENTATION OF MU		Minus ***		CI AIM		łΓ	X42=		OR	X84≈			
	PHSI PHESE	NIATION OF MI	ULI IPLE DEF	ENDEN	CLAIM		' [	+140=		OR	+280=			
	í							TOTAL			TOTAL			
		A	DOIT. FEE		OR	ADDIT. FEE								
		(Column 1)			mn 2)	(Column 3)	<b>.</b>	4						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	floor	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus			=	1 L	X\$ 9=		OR	X\$18=			
	Independent	•	Minus	***	T () 4124	-	4 T	X42=		OR	X84=			
╠	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  AT								TOTAL			TOTAL			
	If the "Highest Nu	mber Previously P	aid For IN TH	IS SPACE	is less tha	ın 20, enter "20	)." A	DOIT. FEE		OR	ADDIT. FEE			
<b> </b>	'if the "Highest Nu The "Highest Nun	imber Previously Pa nber Previously Pa	raid For" IN TH aid For" (Total o	IS SPACE r independ	is less the dent) is the	an 3, enter "3." e highest numb	er four	nd in the app	propriate box	k iln cạ				